

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FILED IN MY OFFICE
JACQUELYN F. CALLANEN
ELECTIONS DIVISION
FORM C/OH
COVER SHEET PG 1

2011 JUL -6 PM 3:03
27
BEXAR COUNTY

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

SUSAN

L

NICKNAME

LAST

SUFFIX

PAMERLEAU

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

230 Dwyer Ave, Unit #1102

San Antonio, TX 78204-1038

☐ change of address

5 CANDIDATE /
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(210)

566-8920

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

WADE

B

NICKNAME

LAST

SUFFIX

SHELTON

7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

600 NAVARRO

Ste 500

San Antonio, TX 78205

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(210)

581-5577

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign treasurer
appointment (officeholder only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year

01 / 16 / 2011

THROUGH

Month Day Year

07 / 15 / 2011

11 ELECTION

ELECTION DATE

Month Day Year

/ /

ELECTION TYPE

☐ Primary

☐ Runoff

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITURES MADE BY OTHERS WITHOUT THE CANDIDATE'S PRIOR CONSENT OR APPROVAL.
CANDIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATION ONLY IF THEY RECEIVE NOTIFICATION OF THE DIRECT CAMPAIGN EXPENDITURE.

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

15 C/OH NAME

SUSAN L. PAMERLEAU

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE
FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages18 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 22,396.82

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 24,058.00

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 275.75

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Susan L. Pamerleau
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susan Pamerleau, this the 6th day of July, 20 11, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

COY J. West

6 Contributor address; City; State; Zip Code

4315 Muirfeld
San Antonio, TX 78229-4675

7 Amount of contribution (\$)

\$10.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

James E Wright & Melissa G. Browning

Contributor address; City; State; Zip Code

7400 Crestway Drive, #1407
San Antonio, TX 78239

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Kenneth & Marlene Baliles

Contributor address; City; State; Zip Code

1603 Wolf Crest
San Antonio, TX 78248-1332

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Jackie & Barbara Moothart

Contributor address; City; State; Zip Code

7400 Crestway Drive, #1105
San Antonio, TX 78239

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

William & Patricia Gordon

Contributor address; City; State; Zip Code

260 Genesee Road
San Antonio, TX 78209

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

R. Clark & Jane Boddy

6 Contributor address: City: State: Zip Code

156 Thelma Drive
San Antonio, TX 78212-2516

7 Amount of contribution (\$)

\$125.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Patrick Sweazingen, Jr

Contributor address: City: State: Zip Code

310 Argyle Avenue
San Antonio, TX 78209

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Pat & Kelley Frost

Contributor address: City: State: Zip Code

604 Garraty Road
San Antonio, TX 78209

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

John Davidson

Contributor address: City: State: Zip Code

7550 IH-10 W, Ste 800
San Antonio, TX 78229-5814

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

June Deason

Contributor address: City: State: Zip Code

4127 Strathmore
San Antonio, TX 78217

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Rosemary Kowalski

6 Contributor address; City; State; Zip Code

1 Towers Park Lane, #1512
San Antonio, TX 78209

7 Amount of contribution (\$)

\$125.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

James D. Goudge

Contributor address; City; State; Zip Code

200 Claiborne Way
San Antonio, TX 78209

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Joe R, Jr & Jocelyn Straus

Contributor address; City; State; Zip Code

555 Argyle Avenue
San Antonio, TX 78209-5612

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Paul H & Ann Smith

Contributor address; City; State; Zip Code

435 Ridgemoor Avenue
San Antonio, TX 78209-2838

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Jack McDonough

Contributor address; City; State; Zip Code

8518 Ulysses
Universal City, TX 78148-2616

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Barbara & Michael Gentry

6 Contributor address; City; State; Zip Code

104 Hiler Road
San Antonio, TX 78209-2731

7 Amount of contribution (\$)

\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Thad Ziegler

Contributor address; City; State; Zip Code

PO Box 8298
San Antonio, TX 78208

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

William & Margaret Trieschmann

Contributor address; City; State; Zip Code

265 Geneseo Road
San Antonio, TX 78209

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

Wilbur Matthews

Contributor address; City; State; Zip Code

9121 E. Valley View Lane
San Antonio, TX 78217

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/11/11

Full name of contributor

☐ out-of-state PAC (ID#)

James W. Gorman

Contributor address; City; State; Zip Code

7373 Broadway Ste 508
San Antonio, TX 78209

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Mark & Lori Wright

6 Contributor address; City; State; Zip Code

26 Stratton Lane
San Antonio, TX 78257-1278

7 Amount of contribution (\$)

\$1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/13/11

Full name of contributor

☐ out-of-state PAC (ID#)

Robert R. Clemons

Contributor address; City; State; Zip Code

230 Dwyer Avenue, #1103
San Antonio, TX 78204

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/15/11

Full name of contributor

☐ out-of-state PAC (ID#)

Truce V. Lewellyn

Contributor address; City; State; Zip Code

5000 Fawn Meadow, Apt #335
San Antonio, TX 78240

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/15/11

Full name of contributor

☐ out-of-state PAC (ID#)

Wayne Harwell

Contributor address; City; State; Zip Code

PO Box 17065
San Antonio, TX 78217

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/15/11

Full name of contributor

☐ out-of-state PAC (ID#)

Angie & Bill Hale

Contributor address; City; State; Zip Code

8641 London Hts
San Antonio, TX 78254-2306

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Henry Viccellio, Jr

6 Contributor address; City; State; Zip Code

8010 Grand Avenue
Bainbridge Island, WA 98110-2946

7 Amount of contribution (\$)

\$1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Mariola Smith

Contributor address; City; State; Zip Code

457 Retama Way Drive
San Antonio TX 78240-1533

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Beth Cathey

Contributor address; City; State; Zip Code

203 Bobcat Bend
Shavano Park TX 78231-1437

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Edward E. Whitacre, Jr

Contributor address; City; State; Zip Code

155 Bushnell Avenue
San Antonio, TX 78212-5204

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Edwin Whitney

Contributor address; City; State; Zip Code

9303 Montessori
San Antonio, TX 78217

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/11/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Red McCombs

6 Contributor address; City; State; Zip Code

755 E. Mulberry, Ste 600
San Antonio, TX 78212

7 Amount of contribution (\$)

\$1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Donn & Robin Greiner

Contributor address; City; State; Zip Code

4526 Black Oak Woods
San Antonio, TX 78249-1455

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Jack & Sherri Dugas

Contributor address; City; State; Zip Code

16426 Hornet Creek
San Antonio, TX 78247

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Wesley Becken

Contributor address; City; State; Zip Code

102 Sunrise Canyon Dr
Universal City, TX 78148-3459

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

☐ out-of-state PAC (ID#)

Diane D. Rath

Contributor address; City; State; Zip Code

419 Wiltshire Ave
San Antonio, TX 78209

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. TAMER LEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/22/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Jim Daniell

6 Contributor address; City; State; Zip Code

601 Terrell Rd
San Antonio, TX 78209-6130

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/22/11

Full name of contributor

☐ out-of-state PAC (ID#)

Harriet Marmon Helmle

Contributor address; City; State; Zip Code

401 Horizon Crest
Boerne, TX 78006

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/22/11

Full name of contributor

☐ out-of-state PAC (ID#)

Reagan Houston, IV

Contributor address; City; State; Zip Code

PO Box 790390
San Antonio, TX 78279

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/26/11

Full name of contributor

☐ out-of-state PAC (ID#)

Mary Jane Houston

Contributor address; City; State; Zip Code

8700 Tesoro Drive, Ste 340
San Antonio, TX 78217-6218

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/26/11

Full name of contributor

☐ out-of-state PAC (ID#)

Hal & Amy Zesch

Contributor address; City; State; Zip Code

134 W. Elsmere Place
San Antonio, TX 78212-2347

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/26/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Lois White

6 Contributor address; City; State; Zip Code

1302 Dawson St
San Antonio, TX 78202

7 Amount of contribution (\$)

\$75.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/26/11

Full name of contributor

☐ out-of-state PAC (ID#)

Ted Terry

Contributor address; City; State; Zip Code

122 Canterbury Hill St
San Antonio, TX 78209-5422

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/30/11

Full name of contributor

☐ out-of-state PAC (ID#)

Stephanie & Johnny Ramsey

Contributor address; City; State; Zip Code

270 E. Oakview Place
San Antonio, TX 78209-3308

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/30/11

Full name of contributor

☐ out-of-state PAC (ID#)

Padgett-Stratemann *6(PSCO) PAC

Contributor address; City; State; Zip Code

100 NE Loop 410, Ste 1100
San Antonio, TX 78216

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/30/11

Full name of contributor

☐ out-of-state PAC (ID#)

Dawn Johnson

Contributor address; City; State; Zip Code

27 Three Lake Drive
San Antonio, TX 78248-1022

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/14/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Ed & Nancy Lee Kelley

6 Contributor address; City; State; Zip Code

2 Mallory Lane
San Antonio, TX 78257

7 Amount of contribution (\$)

\$500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/14/11

Full name of contributor

☐ out-of-state PAC (ID#)

Madison & Cathy O. Smith

Contributor address; City; State; Zip Code

132 E. Oakview Place
San Antonio, TX 78209-3306

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/14/11

Full name of contributor

☐ out-of-state PAC (ID#)

Roy J. Gilbert

Contributor address; City; State; Zip Code

4600 Goldfield
San Antonio, TX 78218-4698

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/23/11

Full name of contributor

☐ out-of-state PAC (ID#)

Dawn Lothringer

Contributor address; City; State; Zip Code

PO Box 434
Pleasanton, TX 78064

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/25/11

Full name of contributor

☐ out-of-state PAC (ID#)

Carole Clark

Contributor address; City; State; Zip Code

142 Woodland Ranch Road
Boerne, TX 78015-8341

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7/5/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

USAA Federal Savings Bank

6 Contributor address; City; State; Zip Code

10750 McDermott Freeway
San Antonio, TX 78288

7 Amount of contribution (\$)

\$6.66

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

Interest on checking;
debit rebate

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/25/11

Full name of contributor

☐ out-of-state PAC (ID#)

NUSTAR PAC

Contributor address; City; State; Zip Code

2330 North Loop 1604 West
San Antonio, TX 78248

Amount of contribution (\$)

\$500.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/27/11

Full name of contributor

☐ out-of-state PAC (ID#)

Susan Pamerleau

Contributor address; City; State; Zip Code

230 Dwyer Ave, #1102
San Antonio, TX 78204

Amount of contribution (\$)

\$105.16

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/5/11

Full name of contributor

☐ out-of-state PAC (ID#)

Eugenia Wright

Contributor address; City; State; Zip Code

142 Kennedy
San Antonio, TX 78209

Amount of contribution (\$)

\$250.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. FAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/5/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Linda L. Elliott

6 Contributor address; City; State; Zip Code

PO Box 461186
San Antonio, TX 78246-1186

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6/5/11

Full name of contributor

☐ out-of-state PAC (ID#)

Deborah Bauer

Contributor address; City; State; Zip Code

2 Champions Lane
San Antonio TX 78258

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/5/11

Full name of contributor

☐ out-of-state PAC (ID#)

Kathleen Foster

Contributor address; City; State; Zip Code

12531 Elm Country Lane
San Antonio, TX 78230

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/9/11

Full name of contributor

☐ out-of-state PAC (ID#)

H. B. Zachry, Jr

Contributor address; City; State; Zip Code

310 S St Mary's St, Ste 2100
San Antonio, TX 78205-3108

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/13/11

Full name of contributor

☐ out-of-state PAC (ID#)

Germano Hasslocher

Contributor address; City; State; Zip Code

8520 Crownhill Blvd
San Antonio, TX 78209

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMER LEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/16/11

5 Full name of contributor

Jim Lunz

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

221 Ogden Lane
San Antonio, TX 78209-5136

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/16/11

Full name of contributor

William B. Briggs

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

13676 Armstead Drive
St Louis, MO 63131-1513

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/16/11

Full name of contributor

Charles E. Cheever, Jr

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

604 Ridgmont
San Antonio, TX 78209

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/18/11

Full name of contributor

Cal & Barbara Banker

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

230 Geddington
Shavano Park, TX 78249-2064

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/18/11

Full name of contributor

Davidson & Troilo, PC
Arthur Troilo - Committee for Civic Awareness

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7550 IH-10 W, Ste 800
San Antonio, TX 78229

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

16

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5/18/11

5 Full name of contributor

☐ out-of-state PAC (ID#)

Jack Guenther

6 Contributor address; City; State; Zip Code

153 Treeline Park, Ste 300
San Antonio, TX 78209-1880

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

5/18/11

Full name of contributor

☐ out-of-state PAC (ID#)

Richard Wade

Contributor address; City; State; Zip Code

12950 Country Parkway, Ste 100
San Antonio, TX 78216

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/22/11

Full name of contributor

☐ out-of-state PAC (ID#)

George & Ann Berg

Contributor address; City; State; Zip Code

20806 Glen Cove
San Antonio, TX 78266

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/18/11

Full name of contributor

☐ out-of-state PAC (ID#)

George C. Hixon

Contributor address; City; State; Zip Code

315 E. Commerce St Ste 300
San Antonio, TX 78205

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

5/22/11

Full name of contributor

☐ out-of-state PAC (ID#)

Sally Morehouse

Contributor address; City; State; Zip Code

312 Pearl Parkway, Bldg 2-201
San Antonio, TX 78215-1262

Amount of contribution (\$)

\$125.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

1

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date**6** Full name of pledgor☐ out-of-state PAC (ID# _____)**8** Amount of
pledge (\$)**9** In-kind description
(if applicable)**7** Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)**4**

TOTAL OF UNITEMIZED LOANS:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date of loan**7** Name of lender☐ out-of-state PAC (ID#:**9** Loan Amount (\$)**6** Is lender
a financial
institution?

Y N

8 Lender address; City; State; Zip Code**10** Interest rate**11** Maturity date**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☐ none**15** GUARANTOR
INFORMATION**16** Name of guarantor**18** Amount Guaranteed (\$)☐ not applicable**17** Guarantor address; City; State; Zip Code**19** Principal Occupation (See Instructions)**20** Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#:

Loan Amount (\$)

Is lender
a financial
institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ noneGUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2	2 FILER NAME SUSAN L. PAMERLEAU	3 ACCOUNT # (Ethics Commission Filers)
--	--	---

4 Date 5/25/11	5 Payee name The Silo - Elevated Cuisine
---------------------------------	---

6 Amount (\$) \$1,006.97	7 Payee address; City; State; Zip Code 1133 Austin Hwy San Antonio, TX 78209
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage	(b) Description (If travel outside of Texas, complete Schedule T) Catering
---------------------------------	---	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
---	-------------------------------	---------------	-------------

Date 6/1/11	Payee name Janelle McArthur
-----------------------	---------------------------------------

Amount (\$) \$3,000.00	Payee address; City; State; Zip Code PO Box 691422 San Antonio, TX 78269
----------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting	Description (If travel outside of Texas, complete Schedule T) Consulting
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 6/1/11	Payee name Janelle McArthur for House of Print & Copy
-----------------------	---

Amount (\$) \$965.20	Payee address; City; State; Zip Code PO Box 691422 San Antonio, TX 78269	354 West Sunset Rd San Antonio, TX 78209
--------------------------------	--	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Printing
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 6/1/11	Payee name Janelle McArthur for Master Mailing Services
-----------------------	---

Amount (\$) \$479.91	Payee address; City; State; Zip Code PO Box 691422 San Antonio, TX 78269	3823 Thousand Oaks Dr San Antonio, TX 78217
--------------------------------	--	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Mailing Services
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <u>2</u>		2 FILER NAME <u>SUSAN L. PAMERLEAU</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6/1/11</u>		5 Payee name <u>Janelle McArthur for US Postal Service</u>			
6 Amount (\$) <u>\$663.41</u>		7 Payee address; City; State; Zip Code <u>P.O. Box 691422</u> <u>San Antonio, TX 78269</u> <u>Cedar Elm Station</u> <u>5837 De Zavala Rd</u> <u>San Antonio, TX 78249-9998</u>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <u>Advertising</u>		(b) Description (If travel outside of Texas, complete Schedule T) <u>Postage</u>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>6/27/11</u>		Payee name <u>Republican Party of Bexar County</u>			
Amount (\$) <u>\$742.59</u>		Payee address; City; State; Zip Code <u>900 NE Loop 410, Ste D-105</u> <u>San Antonio, TX 78209</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Advertising</u>		Description (If travel outside of Texas, complete Schedule T) <u>Printing & Mailing</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date <u>7/5/11</u>		Payee name <u>Susan Pamerleau</u>			
Amount (\$) <u>\$17,200.00</u>		Payee address; City; State; Zip Code <u>230 Dwyer Avenue, #1102</u> <u>San Antonio, TX 78204-1038</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Loan Repayment</u>		Description (If travel outside of Texas, complete Schedule T) <u>Personal Loans [\$10,000.00 - 10/25/10]</u> <u>\$7,200.00 - 11/1/10]</u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

1

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Payee name

6 Amount (\$)

7 Payee address; City; State; Zip Code

☐ Reimbursement from
political contributions
intended

8 PURPOSE
OF
EXPENDITURE

(a) Category (See categories listed at the top of this schedule)

(b) Description (If travel outside of Texas, complete Schedule T)

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

☐ Reimbursement from
political contributions
intended

PURPOSE
OF
EXPENDITURE

Category (See categories listed at the top of this schedule)

Description (If travel outside of Texas, complete Schedule T)

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

☐ Reimbursement from
political contributions
intended

PURPOSE
OF
EXPENDITURE

Category (See categories listed at the top of this schedule)

Description (If travel outside of Texas, complete Schedule T)

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

☐ Reimbursement from
political contributions
intended

PURPOSE
OF
EXPENDITURE

Category (See categories listed at the top of this schedule)

Description (If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H: 1		2 FILER NAME SUSAN L. PAMERLEAU		3 ACCOUNT # (Ethics Commission Filers)	
4 Date		5 Business name			
6 Amount (\$)		7 Business address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date	Business name				
Amount (\$)	Business address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	
Date	Business name				
Amount (\$)	Business address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	
Date	Business name				
Amount (\$)	Business address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	
Date	Business name				
Amount (\$)	Business address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1		2 FILER NAME SUSAN L. PAMERLEAU		3 ACCOUNT # (Ethics Commission Filers)	
4 Date		5 Payee name			
6 Amount (\$)		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule)		(b) Description (See instructions regarding type of information required.)	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (See instructions regarding type of information required.)	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (See instructions regarding type of information required.)	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (See instructions regarding type of information required.)	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (See instructions regarding type of information required.)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

CREDITS (optional)**SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1

2 FILER NAME

SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)**4** Date**5** Payor name**8** Amount
(\$)**6** Payor address; City; State; Zip Code**7** Reason for credit

Date

Payor name

Amount
(\$)

Payor address; City; State; Zip Code

Reason for credit

Date

Payor name

Amount
(\$)

Payor address; City; State; Zip Code

Reason for credit

Date

Payor name

Amount
(\$)

Payor address; City; State; Zip Code

Reason for credit

Date

Payor name

Amount
(\$)

Payor address; City; State; Zip Code

Reason for credit

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T: 1

2 FILER NAME SUSAN L. PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G
☐ Schedule H ☐ Schedule N ☐ COH-UC ☒ COH-T ☐ PAC-C ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

☐ Schedule A ☐ Schedule B ☐ Schedule C ☐ Schedule D ☐ Schedule F ☐ Schedule G
☐ Schedule H ☐ Schedule N ☐ COH-UC ☐ COH-T ☐ PAC-C ☐ PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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